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CONFIRMATION NO. 7253

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|--|---|-------------------------------|---|---------------------------------------|--------------------------------|
| SERIAL NUMBER 10/738,384 | FILING OR 371(c) DATE 12/17/2003 RULE | CLASS 606 | GROUP ART UNIT 3735 | ATTORNEY DOCKET NO. CTI-201 | |
| APPLICANTS David R. Hennings, Roseville, CA; | | | | | |
| ** CONTINUING DATA ***** <i>None</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>None</i> | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 03/27/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> | | STATE OR COUNTRY CA | SHEETS DRAWING 8 | TOTAL CLAIMS 12 | INDEPENDENT CLAIMS 4 |
| ADDRESS 22470 | | | | | |
| TITLE Treatment of superficial pigmented and vascular lesions of the skin | | | | | |
| FILING FEE RECEIVED 428 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |